



# Building Permit Application

Building Inspections

234-3601

Permit # \_\_\_\_\_

<u>Application Date</u> ____ / ____ / ____	<u>Work Type:</u> <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Building Permit <input type="checkbox"/> Demolition <input type="checkbox"/> Sign	<u>Is Applicant Owner?</u> Yes / No
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Asbestos Present? Yes / No

Located in Flood Plain? Yes / No

Is Building Vacant? Yes / No

City of Wheeling Business License? Yes / No

If Yes, how long? \_\_\_\_\_

Parcel Type: ☐ Residential    ☐ Commercial    ☐ Industrial

Street Address where work is being done:

Owner's First Name:

Last Name:

Phone:

Owner's Address:

CONTRACTOR INFORMATION	Contractor's Business Name	WV License Number
General Contractor		
Excavation		
Concrete		
Carpentry		
Electrical		
Plumbing		
Heating & A/C		
Roofing		
Masonry		
Drywall		
Demolition		
Other		

Scope of work to be done:

Must Attach Detailed Site Plan: Yes / No

Estimated Value of Work \$ \_\_\_\_\_

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to this permit.

Signature of Applicant

Address of Applicant

Phone

Print Name

Owner / Contractor

Codes Official / Inspector: \_\_\_\_\_